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## FAX TRANSMISSION

DATE: July 12, 2005

PTO IDENTIFIER: Application Number 10/527649  
Patent Number

Inventor: Gordon Calundann et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (703) 872-9306

FROM: CONNOLLY BOVE LODGE & HUTZ LLP  
Ashley I. Pezzner

PHONE: (302) 658-9141

Attorney Dkt. #: 12834-00010-US

PAGES (Including Cover Sheet): 8

CONTENTS: Fee Transmittal (1 page)  
Transmittal Of Combined Declaration And Power Of Attorney (1 page)  
Combined Declaration And Power Of Attorney (4 pages)  
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Certificate of Transmission (1 page)

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Application No. (if known): 10/527649

Attorney Docket No.: 12834-00010-US

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Fee Transmittal (1 page)  
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NO. 3139 P. 3/8

JUL 12 2005

PTO/8B/17 (12-04v2)

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## FEE TRANSMITTAL

### For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

|                                |             |               |
|--------------------------------|-------------|---------------|
| <b>TOTAL AMOUNT OF PAYMENT</b> | <b>(\$)</b> | <b>130.00</b> |
|--------------------------------|-------------|---------------|

**Complete if Known**

|                      |                  |
|----------------------|------------------|
| Application Number   | 10/527849        |
| Filing Date          | March 14, 2005   |
| First Named Inventor | Gordon Calundann |
| Examiner Name        | Not Yet Assigned |
| Art Unit             | N/A              |
| Attorney Docket No.  | 12834-00010-US   |

**METHOD OF PAYMENT** (check all that apply)

☐ Check    ☐ Credit Card    ☐ Money Order    ☐ None    ☐ Other (please identify):

☒ Deposit Account      Deposit Account Number: 03-2775      Deposit Account Name: Connolly Bove Lodge & Hutz LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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### FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

## 2. EXCESS CLAIM FEES

| Fee Description                                    | Fee (\$) | Fee (€) |
|--|----------|---------|
| Each claim over 20 (including Reissues)            | 50       | 25      |
| Each independent claim over 3 (including Reissues) | 200      | 100     |
| Multiple dependent claims                          | 360      | 180     |

### Multiple dependent claims

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|-----------------|----------------------|
| - 32 =              | x                   | =               |                      |

### Multiple Dependent Claims

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|-----------------|----------------------|-----------------|----------------------|
|---------------------|---------------------|-----------------|----------------------|-----------------|----------------------|

\_\_\_\_\_ - 32 = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|----------------------|---------------------|-----------------|----------------------|
| -4                   | X                   | =               |                      |

### 3. APPLICATION SIZE FEE

**3. APPLICATION SIZE FEE**  
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = \_\_\_\_\_ /50 \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_  
\_\_\_\_\_ Fee Paid (\$)

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1051 Surcharge-Late oath or declaration

130.00

## SUBMITTED BY

|                   |                   |
|-------------------|-------------------|
| Signature         | Ashley J. Pezzner |
| Name (Print/Type) | Ashley J. Pezzner |

|                                      |        |
|--------------------------------------|--------|
| Registration No.<br>(Attorney/Agent) | 35,648 |
|--------------------------------------|--------|

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Date July 12, 2005

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Application No.: 10/527649

Docket No.: 12834-00010-US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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In re Patent Application of:  
Gordon Calundann et al.

Application No.: 10/527649

Group Art Unit: N/A

Filed: March 14, 2005

Examiner: Not Yet Assigned

For: PROTON-CONDUCTING MEMBRANE AND  
ITS USE

**TRANSMITTAL OF COMBINED DECLARATION AND POWER OF ATTORNEY**

MS PCT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Applicant submits herewith the executed Combined Declaration And Power Of Attorney.  
Applicant has not received a Notification Of Missing Requirements.

Please charge our Deposit Account No. 03-2775 in the amount of \$130.00 covering the required fees. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 03-2775, under Order No. 12834-00010-US.

Respectfully submitted,

By Ashley I. Pezzner  
Ashley I. Pezzner

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